RI SOS Filing Number: 202199377040 Date: 7/19/2021 1:18:00 PM



Statement of Change of Registered Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

2021 JUL 19 P 1: 16

Pursuant to the provisions of RIGL $7-6-13$ or $7-6-78$ the undersigned corporation submits the following		
statement for the purpose of changing its registered agent in the State of Rhode Island:		
Entity ID Number 2. Exact Name of the Corporation		
001679877 The New England Down rown Alliance Inc		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 53 Federal Stelet		
City/Town WUONSO chat	RHODE ISLAND	zip 02895
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:		
Kwadwo Adom Yesoah		
5. The address of the NEW registered office is:		
Street Address (NOT a P.O. Box) 3970 POST Road		
City/Town Warwide	State RHODE ISLAND	zip 02886
6. The name of the NEW registered agent is:		
o. The hama of the filter regionaled agent is:	•	
Sidney Martinez		<u> </u>
Sidney Martinez. 7. The address of the corporation's registered office and the	address of the office of its rec	jistereo agent, as changed, will
7. The address of the corporation's registered office and the be identical.		jistereo agent, as changed, will
SIGNEY MAY TIMEZ. 7. The address of the corporation's registered office and the be identical. 8. The change was authorized by a resolution duly adopted	by its board of directors.	
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51 Aney Martinez. 7. The address of the corporation's registered office and the be identical. 8. The change was authorized by a resolution duly adopted Under penalty of perjury, I declare and affirm that I have example to the control of the change was authorized by a resolution duly adopted.	by its board of directors. mined this Statement of Char	
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Sidney Martinez- 7. The address of the corporation's registered office and the be identical. 8. The change was authorized by a resolution duly adopted Under penalty of perjury, I declare and affirm that I have exa Corporation, and that all statements contained herein are the Name of President/Vice President of the Corporation Wallow Hall	by its board of directors. mined this Statement of Char	ige of Registered Agent by the

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED JUL 19 2021

BY CM DIKSA